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Saving Lives and Improving Health Outcomes in Tanzania through Increased Access to Contraceptives

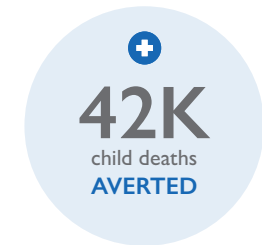
Access to voluntary family planning and reproductive health (FP/RH) services is vital for safe motherhood and healthy families. Having a choice of modern contraceptives allows couples to plan and space births, ensuring families have the means to properly care for their children. USAID ensures an uninterrupted supply of quality FP commodities worldwide through the USAID Global Health Supply Chain Program—Procurement and Supply Management (GHSC-PSM) project.¹

With a population of 58 million²—more than double what it was in 1990—the average woman in Tanzania gives birth to 4.9 children in her lifetime.³ In 2019, approximately 26.3 percent of women in Tanzania had an unmet need for FP—meaning they wanted to avoid pregnancy but were not using a modern method of birth control.⁴

The maternal mortality ratio in Tanzania is 524 per 100,000 live births, compared to 534 for sub-Saharan Africa, on average.⁵ The child mortality rate is 50 deaths among children under 5 per 1,000 live births, compared to 76 for the sub-Saharan region.⁶

To address Tanzania's maternal and child health needs, the Government of Tanzania is collaborating with USAID and other partners. This includes increasing investment in FP/RH to reach a projected modern contraceptive prevalence rate of 34.4 percent among all women aged 15 to 49, regardless of marital status, by 2020.⁷

Estimated health impacts from USAID procurement investments



¹Unless otherwise noted, all figures reported in this brief are over the life of the GHSC-PSM project and do not reflect USAID's contraceptive investment prior to FY 2017. The figures reflect delivered commodities, not shipped commodities, and may not be comparable to figures reported in previous materials.

²World Bank, population (2019).

³Population, total - Tanzania | Data (worldbank.org). Accessed December 18, 2020.

⁴Fertility rate, total (births per woman) - Tanzania, Kenya | Data (worldbank.org). Accessed December 3, 2020.

⁵Family Planning 2020: Tanzania: FP2020 Core Indicator Summary Sheet: 2018-2019 Annual Progress Report. Tanzania 2019_C1_Handout.pdf (familyplanning2020.org). Accessed December 18, 2020.

⁶World Bank, Maternal Mortality Ratio. <https://databank.worldbank.org/reports.aspx?source=2&series=SH.STA.MMRT&country=>. Accessed December 18, 2020.

⁷World Bank, Child Mortality Rate. <https://data.worldbank.org/indicator/SH.DYN.MORT>. Accessed December 18, 2020.

⁸Family Planning 2020, Tanzania, 2018. Tanzania 2019_C1_Handout.pdf (familyplanning2020.org). Accessed December 18, 2020.

USAID Contraceptive Investment



In partnership with the Government of Tanzania and other in-country stakeholders, USAID has supported the procurement and distribution of over 10,635,644 FP/RH products to USAID-supported facilities and organizations in Tanzania from FY 2017-2020. The contraceptives, when combined with proper counseling and correct use, are estimated to provide approximately 4,686,060 million couple years protection⁸ and to help prevent:

- 2.1 million unintended pregnancies
- 4,400 maternal deaths
- 627,000 abortions
- 42,000 child deaths⁹

These investments in contraceptives have the potential of saving approximately **\$178 million** in direct spending on healthcare—resources that can be reinvested in Tanzania’s health system.

Through its investments in contraceptives and supply chains, USAID, in collaboration with other global and in-country partners, is helping Tanzania meet its people’s FP/RH needs. Countries that partner with USAID to invest in FP/RH can achieve greater self-reliance by improving their overall health systems and empowering families to plan for their futures.

Methodology

The indicators presented in this brief were calculated by entering procurement data from the GHSC-PSM project database¹⁰ into the Impact 2 model,¹¹ a socio-demographic mathematical model used to measure the impact of FP/RH programs.

The FP/RH impact indicators, as reported in this brief, estimate the global demographic, health and economic impact of the GHSC-PSM project thus far. To make these calculations, GHSC-PSM adjusted certain criteria in the model. For more information, please contact PSMMonitoringandEval@ghsc-psm.org.

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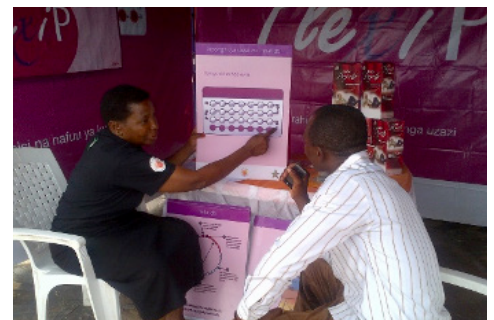
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“I come across many women every day that would like to use contraceptives but who are unable to do so because of resistance from their partners; some are forced to use them in secret. It is just as important to engage men in the whole issue of contraception. Most men just want their wives to be safe and would like assurances that the contraceptives they use will not harm them.”

– Mariam Mwilola, T-MARC Tanzania FP educator⁹



FP educator Mariam Mwilola engages a client in a one-on-one session on FP. Photo credit: T-MARC Tanzania

CONTRACEPTIVE METHODS ¹²	TOTAL PRODUCTS DELIVERED FY 2017-2020*
Combined oral contraceptives	8.9M
Copper intrauterine device	191.4K
Implantable contraceptives	684.4K
Injectable contraceptives	514.4M
Standard days method	321K
TOTAL NUMBER OF CONTRACEPTIVES DELIVERED	10,635,644
TOTAL VALUE OF COMMODITIES	\$8,588,612**

*Data through Q2 of FY 2020

**This figure represents solely the calculation of the value of commodities and does not include shipment or other associated costs.

⁸CYP is the estimated protection provide by contraceptive methods during a one-year period, based upon the volume of all contraceptives sold or distributed free of charge to clients during that period. <https://www.usaid.gov/global-health/health-areas/family-planning/couple-years-protection-cyp>

⁹With funding from USAID, T-MARC promotes the use of FP, including use of USAID-funded contraceptives provided by GHSC-PSM, in support of Tanzania’s efforts to improve maternal and child health.

¹⁰This indicator only estimates reduction in deaths as a result of improved birth spacing. The data linking the contraceptive prevalence rate, birth spacing, and child mortality is currently limited.

¹¹GHSC-PSM’s Automated Requisition Tracking Management Information System (ARTMIS) is used to enter, manage, process and track orders throughout the supply chain.

¹²<https://www.maristopes.org/what-we-do/our-approach/our-technical-expertise/impact-2/>, March 16, 2020. The number of preventable deaths, abortions and unintended pregnancies averted is calculated by entering into the model the number of FP/RH commodities delivered by GHSC-PSM across a selected time period.

¹³Units of measurement for contraceptives: combined oral (cycle); implantable (implant); standard days (piece); injectable (device); condoms (piece); progestin only pills (cycle); copper-bearing intrauterine (device); emergency oral (package)

